تفريغ محاضرات النفسية
أ.د/ فكري النائب

تفريغ / زكريا علي إبراهيمي
الدفعة الأولى - طب بشري

Dissociative Disorders

ملاحظة :- في هذه المحاضرة مر الدكتور مرور سريع جداً
وركز على مواضيع رئيسية فقط وعناوين
وتجاوز عن اشياء كثيرة ... للأسف

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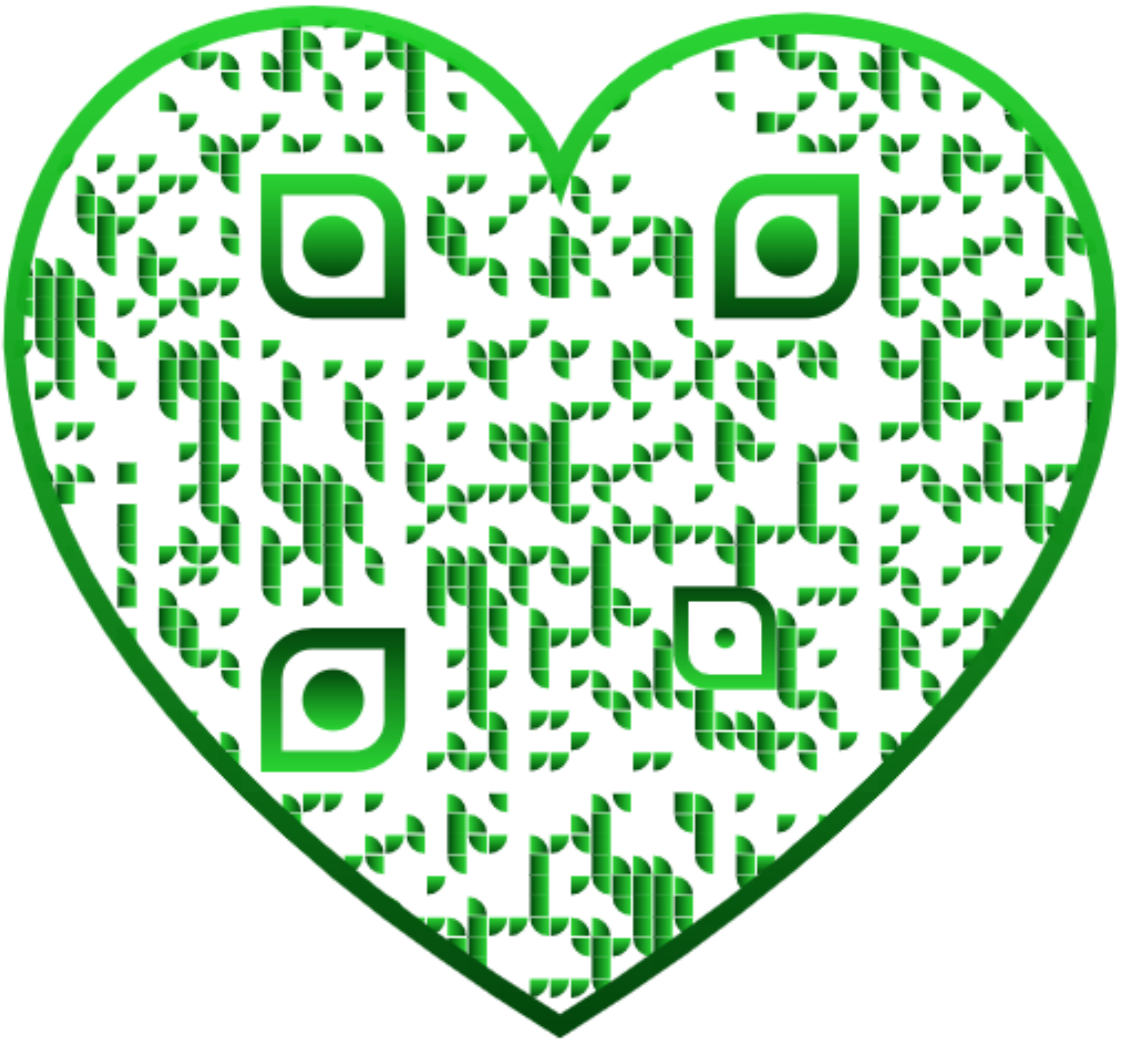

Dissociation

شخصية الأنسان مكونة من ذاكرة ومشاعر وعواطف واحاسيس --- الخ جميع هذة الأشياء مرتبطة مع بعض ومتناسقة اذا حدث فصل وخلل في ترابطها يحصل الـ (Dissociation)

- A disruption in the normally integrated functions of identity, consciousness, memory, and perception
- Not due to the effects of a substance or a general medical condition
- Results in amnesia, depersonalization, and/or multiple personalities in the same individual

جميع هذة المواقف الظواهر الشائعة طبيعية

Common Dissociative Experiences in Everyday Life

- Daydreaming — يحلم ويتخيل وهو صاحي، احلام اليقظة وهذه الظاهرة طبيعية
- Missing parts of conversations — تدخل محاضرة مثلاً تنتصر نصف او بعض الاجزاء فيها
- Vivid fantasizing
- Forgetting part of drive home — وانت مروح الى البيت بالسيارة وانت تقودها تجد نفسك في البيت ايش حصل في الطريق مش عارف
- Calling one number when intending to call another — تشتي تتصل بشخص محدد تقوم تتصل لشخص آخر
- Driving to one place when intending to drive elsewhere
- Reading an entire page & not knowing what you read
- Not sure whether you've done something or only thought about doing it
- Seeing oneself as if looking at another person
- Remembering the past so vividly you seem to be reliving it
- Not sure if an event happened or was just a dream

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Possible Causes of Dissociation

- Fatigue
- Sleep deprivation — نوم غير كافي
- Stress
- Binge drinking — شرب الكحول بكميات كبيرة دفعة واحدة
- Drug use → القات او الشاي او أدوية
- Confronting a new environment — بيئة جديدة انتقل اليها شخص منهش منها ممكن تسبب له
- Feeling preoccupied or conflicted
- Engaging in certain religious or cultural rituals or events — طقوس دينية او شعبية معينة يسموها « الزار » يطبلوا فيها ويرقصوا ويدوروا لما يفصل

Making a Diagnosis

- ★ Dissociative symptoms are only concerning when they become chronic and defining features of people's lives — بنشخص الشخص في الحالات التالية
  - مثلاً الشخص اصبح بينسى بشكل متكرر ومستمر وبشكل كبير
- Quantity (frequency) & quality of dissociative experiences
- Cultural influences – are dissociative states accepted as part of religious or social experiences in a culture? — هل هذا الشيء او الظاهرة أثرت على حياته بحسب ثقافته من الممكن يكون متأقلم وعادي عايش حياته خلاص هذا عادي، لكن البعض لا قد يسبب هذا Depression و Stress
- Mood swings or changes — لسبب هذه الظاهرة لجأ عنه الشخص مزاج متقلب وربما الشباب

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Differential diagnosis

- Substance Intoxication
- Psychosis
- Depression
- Personality Disorders
- Malingering

Dissociative Amnesia

- This disorder is characterized by a blocking out of critical personal information, usually of a traumatic or stressful nature because of emotional conflicts or external stressors.

- The onset is sudden.

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لم يتكلم عنها الدكتور

Types of Amnesia

- Anterograde amnesia: the inability to form new memories after the condition producing the amnesia occurred; dissociative amnesia seldom involves anterograde amnesia
- Retrograde amnesia: loss of memory for events that occurred before the onset of the amnesia and the condition that caused it; dissociative amnesia usually involves retrograde amnesia for personal, rather than general, info
- Psychogenic Amnesia: amnesia due to a traumatic or extremely stressful event(s)
- Organic Amnesia: brain injury due to disease, drugs, accident, or surgery

Dissociative Amnesia: Diagnostic Criteria

لم تُشرح

- 1 or more episodes of an inability to recall important personal information
- Can't be attributed to ordinary forgetfulness
- Gaps in memory are most commonly related to a traumatic or extremely stressful event(s)

Patterns of Dissociative Amnesia

- Localized: inability to remember all events occurring during a circumscribed period of time
- Selective: inability to remember specific events occurring during a circumscribed period of time
- Generalized: loss of memory encompasses everything, including one's identity
- **Continuous:** occurs when patients have no memory of events up to and including the present time. This means that patients are alert and aware of their surroundings but are not able to remember anything.
- Systematized: inability to recall memories related to a certain category of information, e.g. memories related to an individual's father

Etiology of Dissociative Amnesia

- Typically occurs following traumatic events:
  - May involve motivated forgetting of traumatic events
  - Poor storage of information during traumatic events due to overarousal
  - Avoidance of emotions during traumatic events, as well as emotional reactions to the events afterward
  - Dissociation during traumatic events
- Extreme life stress in the present

لم يشرح

Treatment for Dissociative Amnesia

- Goals:
  - Help the person to remember forgotten or traumatic events in a controlled way & to accept & integrate them
  - Resolve distressing situations
  - Strengthen coping skills

- Interventions:
  - Involvement of family member/significant other to remember what happened
  - Hypnosis

هنا الشخص يحدث له بشكل مفاجئ فقدان للذاكرة، فيصعد مثلاً الباص او المواصلات او القطار ويسافر مدينة اخرى ويشتغل ويتزوج ويخلف وفجأة يذكر الشخصية السابقة ويعود الى الحياة السابقة ويتركك او بالاصح ينسى تماماً الشخصية الجديدة وهذا يسمى ال (Dissociative Fugue)

Dissociative Fugue: Symptoms & Characteristics

- Person suddenly moves away from home and assumes a new identity, with little or no memory of one's previous identity or past
- A person travels away from home abruptly and unexpectedly
- Is unable to recall some or all of his/her past
- Is confused about his/her identity (some disintegration of identity)
- May assume a partially or completely new identity
- May seem "normal" to people who don't know him/her previously
- Prevalence: very rare – 0.2%

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Etiology of Dissociative Fugue

- Stressor or traumatic event (most common): person may be physically and mentally escaping a threatening environment or intolerable situation
- Chronic stress
- Depression

Treatment of Dissociative Fugue

- Fugue states usually end rather abruptly on their own
- Following the episode, person may or may *not recall events that took place during the* fugue
- Supportive psychotherapy to help person identify & resolve stressors leading to fugue state and to learn better coping skills, so that fugue does not happen again

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Depersonalization Disorder: Characteristics

- 1 or more episodes of depersonalization
- Depersonalization: feeling detached or estranged from your thoughts or body; e.g. feeling like an outside observer, a robot; feeling like you're in a dream, watching a movie
- Derealization: lose sense of external world; e.g. people seem mechanical or dead; things seem dreamlike, or seem to change size &/or shape
- Reality testing remains intact during periods of depersonalization

(الغرابت داخلية)
هُنا يبدأ ليحس الانسان ان فيه حاجه غريبه وان هو مش هو!

هُنا الشخص يحس ان العالم من حوله غريب

يعني الشخص هو عارف بنفسه وبالعالم من حوله لكن بيحس بهذا الشعور وهذا عادةً ما يسبب مشاكل
اذا كان هذا الاحساس مره واحده مثلاً في الشهر، وتصبح مشكله اذا كان هذا لاحساس ثلاث مرات وأكثر في اليوم الواحد

Depersonalization Disorder

- Occasional experiences of depersonalization are common – ½ of all adults have a single brief episode of depersonalization

- Must be so severe, persistent, and frequent that they cause significant distress or impairment in functioning

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Depersonalization Disorder: Research Findings

- Very little is known about this disorder and its treatment
- 50% have additional anxiety and mood disorders
- Demonstrated cognitive deficits on measures of attention, short-term memory, and spatial reasoning
- Demonstrated deficits in emotional responding: tendency to inhibit emotional expression; dysregulation in the HPA axis

ملاحظة الـ
Schizophrinea → معناها الفصـــام
multiple personality → معناها الانفصـــام
« تعدد الشخصيات »

تلاحظون هذه الأشياء في الأفلام
الشخص يصبح معه أكثر من شخصية
بأسم مختلف وشخصية
مختلاف تماماً

تعدد الشخصيات

Dissociative Identity Disorder: Diagnostic Criteria

- This condition, formerly known as *multiple personality disorder*, is characterized by *"switching"* to alternate identities when under stress.
- Caused by severe childhood trauma and severe sexual abuse

السبب الرئيسي لـ

الطفل الذي تعرض للاعتداء أو الضرب فعندما يكبر يحدث هذا عنده
فيقول انا مش الذي تعرضت للضرب هو شخص ثاني وهكذا...

- The onset is insidious

هُنا الشخصية الأم ((الأساسية)) لا تعرف الشخصيات الأخرى
بينما الشخصيات الأخرى تكون عارفة بالشخصية الأم
فتلاً في الصباح دكتور في الليل قاتل وذكر الدكتور اسماء مشاهير أفلام
وقد يصبح الشخص شخصيات أخرى
متوسطها ١٣ شخصية ← يصبح طفل ويكون رجل ويكون مرأة ويكون .. قاتل ويكون عالم ...
يأخذ في المتوسط ١٣ شخصية تتعاقب عليه في فترات مختلفه

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Dissociative Identity Disorder:

Characteristics

- 2 or more distinct identities or personalities (alters), each with its own pattern of perceiving, relating, and thinking, as well as unique behaviors, memories, relationships, and personal History
- Alters are often unaware of each other
- Transitions between alters (switches) are usually abrupt & are often triggered by stress or external cues
- Self-mutilation, post traumatic stress, conversion symptoms, & suicidal behaviors are common
- The alters may even differ in "physical" properties such as allergies, right-or-left handedness, or the need for eyeglass prescriptions. These differences between alters are often quite striking.

DID: Facts & Figures

- Prevalence: 0.5% -1.0% in nonclinical samples; 3-6% of severely disturbed inpatients
- Onset: almost always in childhood
- Gender Differences:
  - 3-9 more frequent in women
  - Women tend to have more identities than men (15 vs. 8)
- Course: tends to last a lifetime in the absence of Treat
- High incidence of comorbid psychological disorders, e.g. substance abuse, depression, anxiety, eating disorders, borderline personality disorder
- Age: frequency of switching may decrease with age
- Biological Correlates: demonstrated changes in optical functioning in alter identities

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Etiology of DID

- Alters are created under conditions of extreme childhood trauma, e.g. severe physical or sexual abuse
- Dissociation represents a natural tendency to escape from unbearable emotional or physical pain, a defense against extreme trauma
- Personality characteristics: suggestible, imaginative
- Lack of social support during or after the abuse
- Chaotic, non-supportive family environment
- Developmental window of vulnerability for DID closes at approximately 9 years of age

Treatment of DID

- Goal: to integrate the alters into 1 coherent personality
- Identify each personality, and its function, roles, & concerns
- Negotiate with personalities to fuse into 1 personality
- Trauma work: identify cues/triggers that provoke memories of trauma &/or dissociation; neutralize emotional charge the memories hold via desensitization; reliving/re-experiencing
- Help person develop adaptive strategies for dealing with stress
- Use of hypnosis is common, but controversial
- Usually long term psychotherapy is indicated
- Antidepressants & antianxiety drugs may be used
- Do no harm! Don't encourage disintegration!

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DID: continued

- People with this disorder is above average intelligence and highly creative
- Famous people
  - Lindsey Lohan
  - Britney Spears
  - Courtney Love
- Other specified dissociative disorder
  - Dissociative trance
- Unspecified Dissociative Disorder

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